

United States District Court

SOUTHERN

DISTRICT OF

NEW YORK

Gail Stern

SUMMONS IN A CIVIL CASE

V.

CASE NUMBER:

Novartis Pharmaceuticals Corporation

08 CV 02341

TO: (Name and address of defendant)

Novartis Pharmaceuticals Corporation
One Health Plaza
East Hanover, New Jersey 07936-1080

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Beattie and Osborn LLP
521 Fifth Avenue, 34th Floor
New York, New York 10175

an answer to the complaint which is herewith served upon you, within twenty days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

J. MICHAEL McMAHON

CLERK

(BY) DEPUTY CLERK

DATE

MAR 06 2008

GAIL STERN
- against -
NOVARTIS PHARMACEUTICALS CORP.

Petitioner(s)
Plaintiff(s)
Respondent(s)
Defendant(s)

AFFIDAVIT
OF SERVICE
INDEX#
08 CV 02341

STATE OF: NEW JERSEY - COUNTY OF: UNION ss:

PASCAL KUVALAKIS _____, being duly sworn deposes and says deponent is not a party to this action, is over the age of 18 and resides in NJ. That on date/time: 03/11/2008 03:30PM, at ONE HEALTH PLAZA EAST HANOVER TWP. NJ 07936 deponent served the within: SUMMONS AND COMPLAINT

Summons, Spanish summons & complaint, the language required by NRCRR 2900.2(e), (f) & (h) was set forth on the face of the summons(es)

On: NOVARTIS PHARMACEUTICALS CORP.

Defendant Respondent Witness (hereinafter called the recipient) therein named.

INDIVIDUAL A <input type="checkbox"/>	By personally delivering to and leaving with said <u>NOVARTIS PHARMACEUTICALS CORP.</u> and that he knew the person so served to be the person mention and described in said <u>SUMMONS AND COMPLAINT</u>																																			
CORPORATION B <input checked="" type="checkbox"/>	By delivering to and leaving with <u>JILL ANDERSEN ESQ.</u> at <u>ONE HEALTH PLAZA EAST HANOVER TWP. NJ 07936</u> and that he knew the person so served to be the <u>ATTORNEY</u> of the corporation.																																			
SUITABLE AGE PERSON C <input type="checkbox"/>	Service was made in the following manner after your deponent was unable with due diligence to serve the defendant in person: By delivering a true copy thereof to and leaving with _____ a person of suitable age and discretion at _____ the said premises being the recipient's <input type="checkbox"/> Dwelling/Usual place of abode <input checked="" type="checkbox"/> Actual place of business within the State of New York.																																			
AFFIXING TO DOOR, ETC. D <input type="checkbox"/>	By affixing a true copy thereof to the door of said premises, the same being the recipient's <input type="checkbox"/> Dwelling/Usual place of abode <input checked="" type="checkbox"/> Actual place of business within the State of New York. Deponent had previously attempted to serve the above named recipient on/at: 1. _____ 2. _____ 3. _____ Deponent spoke with _____ who stated to deponent that the said recipient(s) lived at the aforementioned address, but did not know recipient's place of employment.																																			
MAILING TO RESIDENCE E1 <input type="checkbox"/> Use with C or D	Within 20 days of such delivery or affixing, deponent enclosed a copy of same in a postpaid envelope properly addressed to recipient to recipient's last known residence at _____ and deposited said envelope in an official repository under the exclusive care and custody of the US Postal Service within New York State on <u>03/11/2008</u> .																																			
MAILING TO BUSINESS E2 <input type="checkbox"/> Use with C or D	Within 20 days of such delivery or affixing, deponent enclosed a copy of same in a postpaid envelope properly addressed to recipient to recipient's actual place of business at _____ in an official repository under the exclusive care and custody of the US Postal Service within New York State. The envelope bore the legend "Personal and Confidential" and did not indicate on the outside thereof, by return address or otherwise, that the communication was from an attorney or concerned an action against the recipient and mailed on <u>03/11/2008</u> .																																			
F <input checked="" type="checkbox"/>	DEPONENT STATES THAT THE INDEX # AND FILING DATE WERE CLEARLY VISIBLE ON THE SUMMONS. DESCRIPTION OF THE RECIPIENT OR OTHER PERSON SERVED OR SPOKEN TO ON BEHALF OF THE RECIPIENT IS AS:																																			
VOID WITHOUT DESCRIPTION Use with A,B,C,D	<table border="0"> <tr> <td><input type="checkbox"/> Male</td> <td><input checked="" type="checkbox"/> White Skin</td> <td><input type="checkbox"/> Black Hair</td> <td><input type="checkbox"/> White Hair</td> <td><input type="checkbox"/> 14 - 20 Yrs.</td> <td><input type="checkbox"/> Under 5'</td> <td><input type="checkbox"/> Under 100 Lbs.</td> </tr> <tr> <td><input checked="" type="checkbox"/> Female</td> <td><input type="checkbox"/> Black Skin</td> <td><input type="checkbox"/> Brown Hair</td> <td><input type="checkbox"/> Balding</td> <td><input type="checkbox"/> 21 - 35 Yrs.</td> <td><input type="checkbox"/> 5'0" - 5'3"</td> <td><input type="checkbox"/> 100 - 130 Lbs.</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Yellow Skin</td> <td><input checked="" type="checkbox"/> Blonde Hair</td> <td><input type="checkbox"/> Moustache</td> <td><input checked="" type="checkbox"/> 36 - 50 Yrs.</td> <td><input type="checkbox"/> 5'4" - 5'8"</td> <td><input type="checkbox"/> 131 - 160 Lbs.</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Brown Skin</td> <td><input type="checkbox"/> Gray Hair</td> <td><input type="checkbox"/> Beard</td> <td><input type="checkbox"/> 51 - 65 Yrs.</td> <td><input checked="" type="checkbox"/> 5'9" - 6'0"</td> <td><input type="checkbox"/> 161 - 200 Lbs.</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Red Skin</td> <td><input type="checkbox"/> Red Hair</td> <td><input type="checkbox"/> Glasses</td> <td><input type="checkbox"/> Over 65 Yrs.</td> <td><input type="checkbox"/> Over 6'</td> <td><input type="checkbox"/> Over 200 Lbs.</td> </tr> </table> <p>Other identifying features: _____</p>	<input type="checkbox"/> Male	<input checked="" type="checkbox"/> White Skin	<input type="checkbox"/> Black Hair	<input type="checkbox"/> White Hair	<input type="checkbox"/> 14 - 20 Yrs.	<input type="checkbox"/> Under 5'	<input type="checkbox"/> Under 100 Lbs.	<input checked="" type="checkbox"/> Female	<input type="checkbox"/> Black Skin	<input type="checkbox"/> Brown Hair	<input type="checkbox"/> Balding	<input type="checkbox"/> 21 - 35 Yrs.	<input type="checkbox"/> 5'0" - 5'3"	<input type="checkbox"/> 100 - 130 Lbs.		<input type="checkbox"/> Yellow Skin	<input checked="" type="checkbox"/> Blonde Hair	<input type="checkbox"/> Moustache	<input checked="" type="checkbox"/> 36 - 50 Yrs.	<input type="checkbox"/> 5'4" - 5'8"	<input type="checkbox"/> 131 - 160 Lbs.		<input type="checkbox"/> Brown Skin	<input type="checkbox"/> Gray Hair	<input type="checkbox"/> Beard	<input type="checkbox"/> 51 - 65 Yrs.	<input checked="" type="checkbox"/> 5'9" - 6'0"	<input type="checkbox"/> 161 - 200 Lbs.		<input type="checkbox"/> Red Skin	<input type="checkbox"/> Red Hair	<input type="checkbox"/> Glasses	<input type="checkbox"/> Over 65 Yrs.	<input type="checkbox"/> Over 6'	<input type="checkbox"/> Over 200 Lbs.
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WITNESS FEE G <input type="checkbox"/>	Witness fee of \$0 the authorizing traveling expenses and one day's witness fee: <input type="checkbox"/> was paid (tendered) to the recipient <input type="checkbox"/> was mailed to the witness with subpoena copy.																																			
MILITARY SERVICE <input checked="" type="checkbox"/>	I asked the person spoken to whether defendant was in active military service of the United States or of the state of New York in any capacity whatsoever and received a negative reply. <i>Defendant wore civilian clothes and no military uniform.</i> The source of my information and the grounds of my belief are the conversations and observations above narrated.																																			
Subscribed and Sworn to me this 12 day of March, 2008	<p><i>Jackeline Gonzalez</i></p> <p>I, <u>PASCAL KUVALAKIS</u>, was at the time of service a competent adult not having a direct interest in the litigation. I declare under penalty of perjury that the foregoing is true and correct.</p>																																			
Notary Signature: <i>JACKELINE GONZALEZ</i>	<p>Name of Notary: <u>JACKELINE GONZALEZ</u> Commission Expiration <u>My Commission Expires Dec. 7, 2010</u></p> <p><i>JACKELINE GONZALEZ</i></p> <p>Signature of Process Server</p>																																			
	3/12/2008 Date																																			

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